



Myths and Fact about Dietary Fats and Heart Disease

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Speaker Disclosures

Presenter: Judith Wylie-Rosett, EdD, RD

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Honorarium: Unilever

Objectives

- Identify Current Recommendations for Dietary Fat Intake
- Describe Types of Fat in the Diet and Impact on CVD Risk
- Identify Food Sources of “Beneficial” and “Harmful” Fats
- Practical Tips for Patient Adherence and Behavior Change

Optimal Mix of Macronutrients*

- The Dietary Reference Intakes (DRIs)--
 - 45–65% carbohydrate
 - 20–35% fat
 - 10–35% protein

* Calorie intake appropriate to weight goals.



AHA Lifestyle Recommendations

- Balance calorie intake and physical activity to achieve or maintain a healthy body weight
- Consume a diet rich in vegetables and fruits
- Choose whole-grain, high-fiber foods
- *Consume fish, especially oily fish, at least twice a week*
- Minimize intake of beverages and foods with added sugars
- Choose and prepare foods with little or no salt
- If you consume alcohol, do so in moderation

Circulation 2006;114:82-96; *Circulation* 2009; 119:1161-75



AHA Lifestyle Recommendations

- *Limit intake of saturated fat to 7% of energy, trans fat to 1% of energy, and cholesterol to 300 mg/d by*
- *Choosing lean meats and vegetable alternatives*
- *Selecting fat-free (skim), 1% fat, and low-fat dairy products*
- *Minimizing intake of partially hydrogenated fats*

Circulation 2006;114:82-96; Circulation 2009; 119:1161-75

AHA Healthy Lifestyle Tips

- 2,000 calories daily
- **Fruits and vegetables:** At least 4.5 cups a day
- **Fish (preferably oily fish):** At least two 3.5-ounce servings a week
- **Fiber-rich whole grains:** At least three 1-ounce-equivalent servings a day
- **Sodium:** < 1,500 mg a day
- **Sugar-sweetened beverages:** No more than 450 calories (36 ounces) a week



AHA Healthy Lifestyle Tips

- Other Dietary Measures:
- **Nuts, legumes and seeds:** At least 4 servings a week
- **Processed meats:** No more than 2 servings a week
- **Saturated fat:** Less than 7% of total energy intake

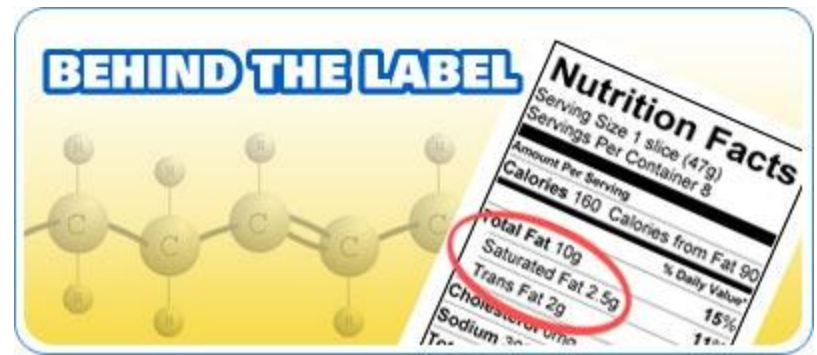
Fat: Quantity and Quantity Recommendations

AHA	2010 Dietary guidelines	Am Diabetes Assoc	Am Cancer Society
Overall dietary pattern	Similar	Similar	Similar
Healthy weight	Similar	Similar	Similar
Normal lipids, blood pressure, glucose	Addresses chronic disease risk	Similar ABCs- <u>A</u> 1c, <u>B</u> P <u>C</u> hol	Emphasis on cancer risk
Physical activity	Similar	Similar	Similar
Fat* < 7% sat, <1% trans fat, < 300 mg chol.	< 10% sat, trans ↓ < 300 mg chol	Similar	Similar
Environment and Policy Issues	Guides policy	Health care systems	Access and environment Issues

* Daily Reference Intake guides the quantity of fat with less focus on percent of total energy from fat. Evidence accumulating with regard to specific fatty acids.

Types of Fat

- Omega 3 fatty acids
- Omega 6 fatty acids
- Saturated fatty acids
- Monounsaturated fatty acids
- Polyunsaturated fatty acids
- Trans fatty acids

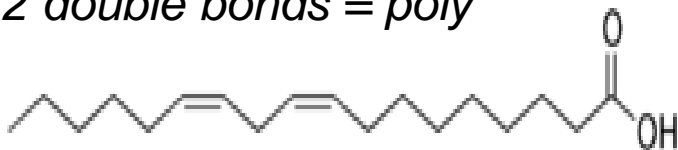


Types of Fat

Unsaturated fatty acid (Cis)

1 double bond = mono

≥ 2 double bonds = poly



Location of 1st double bond for omega 3 vs. 6

Saturated fatty acid

No double bonds



Partial Hydrogenation to create trans fatty acids

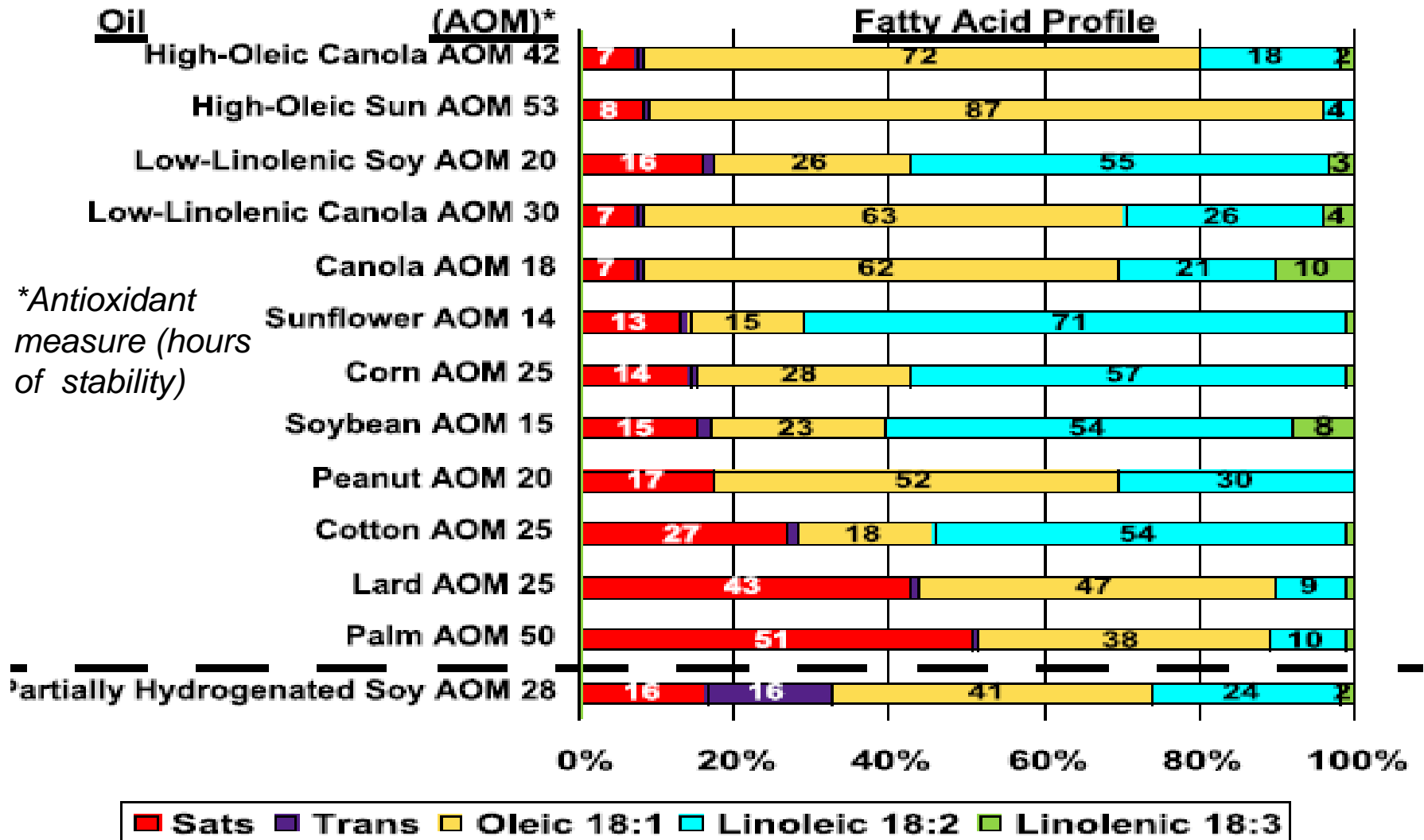
1 double bond left



Introduced - 1911



Comparison of Fats





Omega 3 Fatty Acids

- According to AHA Very Beneficial to CVD, help with rhythm, blood pressure and plaque
- Found in fatty fish, shellfish, flaxseeds, walnuts, canola oil
- 2 servings of fish/week – supplements maybe needed if cholesterol high
- Current guidelines 1000 mg/day for those with CVD



Omega 6 Fatty Acids

- According to AHA Beneficial to CVD, help reduce cholesterol
- Nuts, seeds, sunflower, safflower, corn and soybean oils
- Up to 5 – 10% of calories (12 – 22gm/day)

Monounsaturated Fatty Acids

- According to AHA Good fat choices can help reduce cholesterol
- Canola oil, avocado
- A part of total, daily fat intake

Americanheart.org Accessed March 11, 2011.



Saturated Fatty Acids

- According to AHA avoid or limit – they increase cholesterol
(new controversy on SFA??)
- Animal foods, coconut and palm oils
- No more than 7% of calories

Americanheart.org Accessed march 11, 2011.

Male, 45 years old

MY NAME IS SHORT FOR
'Saturated'

OCCUPATION
Heartbreaker

STATUS
Single, so I have plenty of
time for all my friends

HOMETOWN
A refrigerator near you



Saturated Fatty Acids: Differences

Fatty acid	Structure	Common Food Sources	Biological Action
Lauric Acid	12:0	Coconut oil	Raises total, LDL, and HDL cholesterol, increases some thrombotic factors
Myristic Acid	14:0	Butter fat, coconut oil,	
Palmitic Acid	16:0	Most fats and oils	
Stearic Acid <i>(substitute for trans fat in baking)</i>	18:0	Most fats and oil, cocoa butter. Fully hydrogenated oils (high stearic soybean oil)	Does not affect total LDL or HDL cholesterol,

Trans Fatty Acids

- According to AHA Avoid/limit since trans increase LDL and lower HDL
- Partially hydrogenated oils in some margarines, baked foods and commercially fried foods
- No more than 1% of total calories

Americanheart.org Accessed March 11, 2011.

Male, 41 years old

At home in all 50 states,
United States

YOU'LL ALWAYS FIND ME IN
'Partially hydrogenated oils'

OCCUPATION
Heartbreaker

STATUS
Single, baby. I like to get around.

FAMILY
A brother, Sat. (That's short for Saturated.) And two sisters, Mon and Poly. (As in Mono and Poly-unsaturated fats.)



Puff Pastry

Substitution Challenges



Eckel et al. *Circulation* 2007; 115:2231-46

Interpretating Research with High Media Coverage

Plasma Trans-Palmitoleic Acid*

Incidence of Diabetes

Plasma level	Quintile 1	Quintile 2	Quintile 3	Quintile 4	Quintile 5	p
Incident diabetes cases ; n	93	68	59	46	38	
Hazard Ratio (95% CI)	1.0 (ref)	0.79 (0.54-1.15)	0.89 (0.58-1.33)	0.41 (0.27-0.64)	0.38 (0.24-0.62)	<0.001

* Produced by ruminant animals and found in dairy products

Mozaffarian et al. *Ann Intern Med* 2010; 153:790-799.

Choosing Healthy Fats

- AHA recommends:
- Most people should consume at least 5 to 10% of their total daily calories from omega-6 fatty acids
- Replacing saturated fats with polyunsaturated fats, natural sources of omega-6, may help reduce heart disease risk
- Higher intakes of omega-6 may improve insulin resistance, reduce diabetes risk and lower blood pressure

Harris, W et al. Omega 6 Fatty Acids and Risk for Cardiovascular Disease. Circulation 2009; 119: 902.

American Heart Association

Website -Face the Fats



Snack options



American Heart Association's



An easy-to-use tool calculates:

1. personalized daily calorie needs
2. recommended range for total fats
3. limits for bad fats: saturated and *trans*

<http://www.myfatstranslator.com/>



Heart Health Tips

- Control saturated fats by choosing lean meat and poultry and low or non-fat dairy
- Limit trans fats by avoiding commercial baked or fried foods *Unless Trans Free (defined as < 0.5 g serving)*
- Avoid or limit partially-hydrogenated oils



Healthy Fats

- AHA Very Beneficial Fats –
Fatty Fish, Flax, Walnuts, Canola Oil
- AHA Beneficial Fats –
Nuts, Seeds, Vegetable oils (sunflower, safflower,
corn and soy)
- AHA Good Choice Fats –
Canola and Olive Oil





Bad Fat Choices

- Avoid or limit:
- Saturated fats to no more than 7% of daily calories
- Trans Fats to no more than 1% of daily calories

Americanheart.org. Accessed March 11, 2011.

Shifting to Healthier Fats

- Recipe changes should be gradual
- At the table changes can be rapid
- Think about role fat plays in recipe
- View overall diet balance





Role of Fat in Satiety

- Fat stabilizes and carries flavor
- Fat tenderizes in baking and holds moisture
- Fat keeps sauces, gravies, etc smooth
- Fat lubricates and prevents sticking



Fat Changes

- Goal of changing fat – preserve flavor while boosting healthfulness
- Use tub margarines or oils for spreading
- Use less oil when substituting for solid fats in recipes
- Reduce total fat in a recipe by about $\frac{1}{4}$



Fat Changes

- Substitute other foods for fat in recipes
- Choose fat free yogurt instead of sour cream
- Use non-stick sprays when preparing pans
- Boost other flavors to maintain satiety

AHA Lifestyle Guidelines

- Balance dietary calories with physical activity to maintain normal weight
- Engage in 60 min of moderate to vigorous play or physical activity daily
- Eat vegetables and fruits daily and limit juice intake
- Use vegetable oils and soft margarines low in saturated fat and *trans* fatty acids instead of butter or most other animal fats in the diet

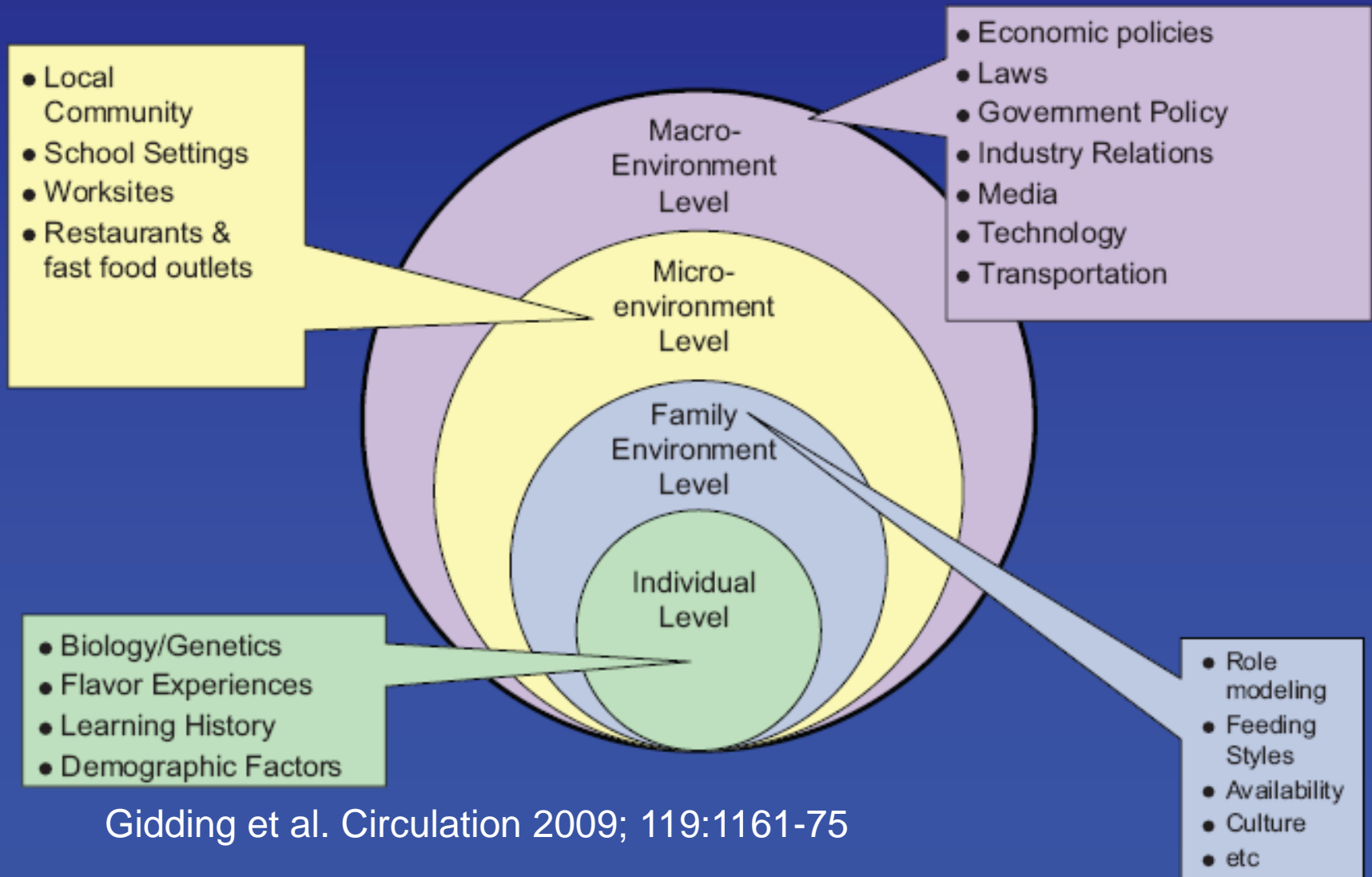
Circulation 2009; 119:161-1175.

AHA Lifestyle Guidelines

- Eat whole-grain breads and cereals rather than refined-grain products
- Reduce the intake of sugar-sweetened beverages and foods
- Use nonfat (skim) or low-fat milk and dairy products daily
- Eat more fish, especially oily fish, broiled or baked
- Reduce salt intake, including salt from processed foods

Influencing Food Choice

A Multi-level Framework for Identifying Facilitators or Barriers to Attaining AHA Dietary Recommendations



Case Study -

AJ -- 66 Year old White female

Social Hx: retired, lives with 2 grown sons, husband died 6 mo.ago.

Family Hx: premature CVD—father died after an MI at age 44

Medical Hx: Patient has been on statin therapy to lower LDL cholesterol,(discontinued -LFT's). Hypothyroidism, Depression

Pt has a mechanical tricuspid valve, placed 25 years ago

Anthropometric Measurements: Ht. 5'2" Wt. 159 lbs. BMI 29.1

Physical exam findings- physical appearance [abdominal obesity, xanthomas], BP 152/90 Well nourished with abdominal obesity

Pertinent Meds: Levothyroxine,75mcg daily, Warfarin 5mg daily, Atenolol 50mg daily, Fluoxetine 20mg daily

Pertinent labs:

Cholesterol (mg/dL) total 255, HDL 25, LDL 152; TG (mg/dL) 386

Glucose (mg/dL) 112; HbA1c 6%

ALT 40 units/L, AST 46 units/L, TSH 4.16 uIU/mL

Case – Nutritional Issues

AJ eats only one meal per day plus sugared tea throughout the day; frequent use of high fat meats 4x/week (meats with gravy, macaroni and cheese) and large servings (1-2c) of starch. The patient came with a limited knowledge base regarding dietary fats that raise cholesterol. She has limited fruit and vegetable intake.

Barriers to Behavioral Goals:

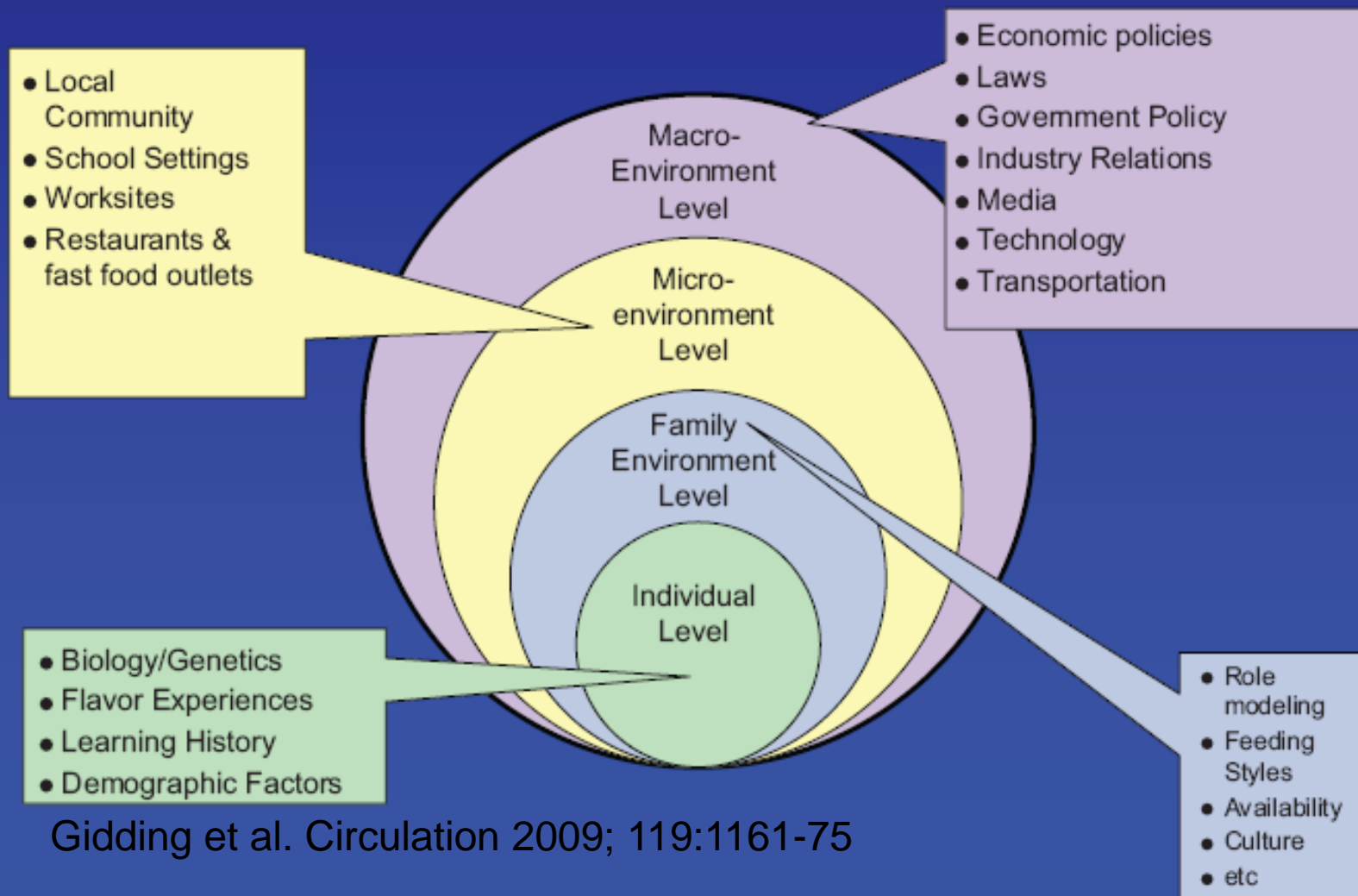
She appeared to grasp the concepts well, but depression related to recent loss of husband 6 months ago limits her interest in making significant changes.

Barriers towards Biochemical, Anthropometric, Physical and Food/Nutrition Goals:

(see barriers to behavioral goals)

Influencing Food Choice

A Multi-level Framework for Identifying Facilitators or Barriers to Attaining AHA Dietary Recommendations



Gidding et al. Circulation 2009; 119:1161-75

Summation

- Total Fat impacts disease risk – type of fat important
- Limit Sat Fats to <7% of calories
- Trans fats as low as possible
- Make changes gradually to shift palate as well
- Choose more whole grains, fruits and vegetables



Thank You!